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State Bar I.D. Number 3069 Attorney for Debtor(s)

IN RF.

IN THE UNITED STATES BANKRUPTCY COURT FOR THE DISTRICT OF MONTANA

IN RE:	Case No.		
MICHAEL WILSON MARROW,	STATEMENT OF DOMESTIC SUPPORT OBLIGATIONS		
Debtor(s).			
Pursuant to Mont. LBR 4002-1(e), the undersigned hereby provides this Statement of			
Domestic Support Obligation, as defined in 11 U.S.C. § 101(14A).			
1. Debtor's name (enter full name): Michael Wilson Marrow.			
2. Does Debtor have a domestic support obligation: yes no _X If yes, please fill out the rest of this form. If no, do not fill out the rest, but sign where indicated below.			
B. Debtor's employer and employer's address:			
4. Name, address, phone number, employer's name, and address of employer for any person responsible with the Debtor for the support:			
5. Name, address and phone number for the holder of the claim of support:			
[If the Debtor does not know the whereabouts of the former spouse, this fact should be affirmatively stated above, but the address for the support collection agency must be provided]			

AS OF THE DATE OF FILING OF THE BANKR	UPTCY PETITION:		
1. Amount of support obligation: \$ per	[i.e. month, week, etc.]		
2. Term of support obligation: from	until		
3. Amount that the domestic support obligation is in arrears: \$			
4. Court name and jurisdiction in which order of support was issued:			
5. Court Case No			
6. Name and address of State Child Support Enforcement Agency involved n such claim:			
I declare under penalty of perjury that the foregoing is true and correct.			
/s/ Michael Wilson Marrow Signature of Debtor	July 13, 2023 Date		

Penalty for making a false statement: Fine up to \$250,000 or imprisonment for up to 5 years or both. 18 U.S.C. \$ 152 and 3571.